<u></u>	
File Number:	
84-1686	
For the reporting period ended December 31.200 l	



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL			
OMB Number.	3235-0337		
Expires:	July 31, 2003		
Estimated average			
hours per full res	ponse 6.00		
Estimated average burden			
hours per interm	ediate		
response	1.50		
Estimated average burden			
hours per minim	um		
response			

			FOF	RM TA-2	
	RE		R REPORTING ACT		NSFER AGENTS TIES EXCHANGE ACT OF 1934
		ATTENTION:		DERAL CRIMINA	OR OMISSIONS OF FACT LL VIOLATIONS. (2) MOD 2 7 2002
1.		I name of Registrant as stated not use Form TA-2 to change name		TA-1:\	365
	Se	ligman New Jersey Ta	x-Exempt Fund, In	ıç.	
2.	a.	During the reporting period. (Check appropriate box.)	has the Registrant engag	ed a service company to	perform any of its transfer agent functions?
		X All	☐ Some	☐ None	· · · · · · · · · · · · · · · · · · ·
	b.	If the answer to subsection company(ies) engaged:	(a) is all or some, pro-	vide the name(s) and t	ransfer agent file number(s) of all service
		Name of Transfer Agent(s):		· · · · · · · · · · · · · · · · · · ·	File No. (beginning with 84- or 85- ):
		Seligman Data Cor	`p.		84–1895
		PFPC			84-1761
					PROCESSED
					JUL 1 0 2002
					THOMSON FINANCIAL
	c.	During the reporting period, transfer agent functions?	has the Registrant been o	engaged as a service co	mpany by a named transfer agent to perform
		☐ Yes	X	] No	
	d.		as a service company to	perform transfer agent	of the named transfer agent(s) for which the functions: (If more room is required, please
		Name of Transfer Agent(s):			File No. (beginning with 84- or 85-):
				11	
SE	C 21	13 (12-00)		$V^{0}$	

1 2	3.	а.		ppropriate reguer of the Curre eposit Insurance	ncy		(Check one bo	x only	·.)	•		
				Governors of th			em					
				and Exchange			·					
			<u>M</u>			_						
		b.					ded Form TA-l omplete, or mi				owing the date or e box.)	n which
			☐ Yes, filed	amendment(s)								
				to file amendm	nent(s)							
			Not applic	able								
		c.	If the answer	to subsection (b	o) is no, pro	vide an exp	lanation:					
	_					<del></del>						
			If	the response	to any o	questions	4-11 below	is no	ne or zer	o, enter "(	."	
	4.	Nu	mber of items r	eceived for tran	nsfer d <b>urin</b> g	the reporti	ng period:	•••••		*******************		
	5.	a.	Total number									
			System (DRS)	, dividend rein	vestment pl	ans and/or d	lirect purchase	plans :	as of Dece	mber 31:		
		b.	Number of ind				estment plan an				ounts	
		C.	Number of ind	lividual securit	yholder DR	S accounts a	as of December	31:		••••••••		
		ď.	Approximate j December 31:	percentage of i	ndividual s	ecwityholde	er accounts fro	m sub	section (a)	in the follo	owing categories	s as of
		_	<u> </u>	T - C		No. End	Limited		1 36	-1 D-b-	Other	7
			Corporate Equity	Corporate Debt	1	Open-End nvestment	Partnersh		Municip Secur	1	Other Securities	
			Securities	Securities		Company Securities	Securiti			lacs	oodiiio	
		-				3ccui itics			<del> </del>			-
		1										
							}		· ·			
J.	6.	Nur	nber of securiti	es issues for w	hich Regist	rant acted in	the following	capaci	ities, as of	December 3	1:	_
					Co	rporate	Open-End	TL	imited	Municipal	Other	7
						curities	Investment	Par	rtnership	Debt	Securities	ŀ
							Company	S	ecurities	Securities		
			n		Equity	Debt	Securities		·			4
		а.	Receives items				-					
			and maintains securityholder	,				1				
		b.	Receives items			<del> </del>		$\vdash$			<del>-  </del>	7
			but does not m				1				1	
			master security	holder files:								
			Does not receive									
			transfer but ma								-	
			master security	noider files:	1	1	1	1			1	1

	<b>a</b> .	Number of issues for which dividend reinvestment plan and/or direct purchase plan services were provided, as of December 31:
3.	b.	Number of issues for which DRS services were provided, as of December 31:
		Dividend disbursement and interest paying agent activities conducted during the reporting period:  i. number of issues
		ii. amount (in dollars)
8.	a.	
		Prior l Current
		Transfer Agent(s) Transfer Agent (If applicable)
		i. Number of issues
		ii. Market value (in dollars)
	b.	Number of quarterly reports regarding buy-ins filed by the Registrant with its ARA (including the SEC) during the reporting period pursuant to Rule 17Ad-11(c)(2):
	c.	During the reporting period, did the Registrant file all quarterly reports regarding buy-ins with its ARA (including the SEC) required by Rule 17Ad-11(c)(2)?
		Yes No
	đ.	If the answers to subsection (c) is no, provide an explanation for each failure to file:
9.	a.	During the reporting period, has the Registrant always been in compliance with the turnaround time for routine items as set forth in Rule 17Ad-2?
		☐ Yes ☐ No
		If the answer to subsection (a) is no, complete subsections (i) through (ii).
		i. Provide the number of months during the reporting period in which the Registrant was not in compliance with the turnaround time for routine items according to Rule 17Ad-2.
		ii. Provide the number of written notices Registrant filed during the reporting period with the SEC and with its ARA that reported its noncompliance with turnaround time for routine items according to Rule 17Ad-2.
10.		mber of open-end investment company securities purchases and redemptions (transactions) excluding dividend, interest distribution postings, and address changes processed during the reporting period:  Total number of transactions processed:
	b.	Number of transactions processed on a date other than date of receipt of order (as ofs):

During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search

b.	Number of lost securityholder accounts that have been remitted to states during the
	reporting period:

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form:	Title: Assistant Secretary
13-25	Telephone number: (212) 850-1613
Name of Official responsible for Form: (First name, Middle name, Last name)	Date signed (Month/Day/Year):
Brian D. Simon	March 25, 2002

r the reporting period ded December 31,	Full Name of Registrant	
this schedule to provide the	name(s) and file number(s) of the named transform transfer agent functions:	er agent(s) for which the Registrant has be
Name(s):		File No. (beginning with 84- or 8
<u> </u>		

Supplement to Form TA-2

File Number